

COMPLIANCE RETURN FORM

ELECTRONIC CERTIFICATION SERVICE PROVIDER (E-CSP)

PURSUANT TO THE PROVISIONS OF THE KENYA INFORMATION AND COMMUNICATIONS ACT 1998, KENYA COMMUNICATIONS REGULATION, THE E-CSP LICENSE CONDITIONS AND E-CSP TECHNICAL REQUIREMENTS

Please note that the latest version of this form must be downloaded from the Authority's website at the end of each quarter [step] in order to capture any official amendments

1. GENERAL INFORMATION

1.1	Name of Licensee (Company Name):								
	Name of Foreign E-CSP (if applicable) :								
	Other Licenses held:								
1.2	Period under review (T	ick against appropriate o	quarter)						
	FINANCIAL YEAR _	(based	d on Government of Keny	ya Financial year e.g 2	2021/2022)				
	Quarter 1 (1st July – 30th Sep)	Quarter 2 (1 st Oct – 31 st Dec)	Quarter 3 (1st Jan – 31st Mar)	Quarter 4 (1 st Apr – 30 th Jun)					
1.3	Address								
	Physical Address:	Street/Road							
	oor No								
	ame of Building Postal Address:								
Р	O. Box		Postal Code						

Po	st Office Town	
3.	Phone Contact:	
Te	l. No	
		Other Tel. Nos.
4.	Email and Web Ac	ldress:
En	nail address:	
W	1 4 1 1	
	ese note that all the address during the quarter. Contact details	dress information requested must be provided above whether or not there were
1.4		
	Name of Head Of Organ	ization
	Title of Head Of Organi	zation
	Name of contact person	
	Title of Contact Person:	
	Telephone:	Email:
	Signature:	Date
Dic	-	mation change during the quarter? (Tick as appropriate) Yes \(\square \) No \(\square \) cation letter on the same.)
1.5	OPERATING DETAIL	LS (to be filed at the end of your financial year)
a)	SHAREHOLDING I	NFORMATION
P	lease attach a copy of the	current certificate of shareholding/ CR12 (Not more than 6 month old).
b)) FINANCIAL DATA:	
S	Specify the start and end of	ates of your firm's financial year below.
F	Financial Year Start Date:	End Date:
P	Please attach the following	ıg;
I.		nal Audited Accounts for the preceding year.

c) TARRIFS (Please attach all the tariffs for services offered under this license)

d) STAFF (Indicate staff directly engaged on licensed services)

			Number of Staff					
Staff category		Local (Kenyan Citizens)		Foreign Nationals				
		Male	Female	Male	Female			
Technical	Permanent							
	Contract							
	Temporary							
Non-Technical	Permanent							
	Contract							
	Temporary							
Tota	al							

PART A: QUARTERLY REPORTING SECTION

(Information to be submitted within 15 days after the end of every Quarter)

2. ACCREDITATION and RECOGNITION FOR THE ECSP

No.	Item	Brief Description
	Date accredited	
	Accreditation certificate number	
	Date of Recognition	
	Recognition certificate number	
	Security Management system	
	Risk Management System	
	Business Continuity Planning	

3. TECHNICAL REQUIREMENTS

Please describe the systems deployed)

Equipment	Capacity	Date of accreditation		Region	Brief Description

4. INCIDENT MANAGEMENT

Equipment	Capacity	Date of accreditation		Region	Brief Description

5. RESOLUTION OF CUSTOMER / CONSUMER ISSUES (attach CRM system output)

	Number of Complaints						
Complaint Type	Consumer Obligations		Subscriber Obligations		Relying Party		
					Obliga	tions	
	Received	Resolved	Received	Resolved	Received	Resolved	
Network Faults							
Poor Service Reception							
Disconnection							
Billing							
Service Interruption							
Interconnection							
Others (Please Specify							
below)							
Total complaints							
CRM Information							
Type Of CRM							
Details of CRM							

<u>Indicate type and details of the Customer Relations Management - CRM System used.</u>

PART B: ANNUAL REPORTING SECTION

(Information to be submitted within 15 days at the end of the Quarter ending 30th June)

1. CERTIFICATE PRACTICE STATEMENT AND CERTIFICATE POLICIES

1.1 Certificate Attributes

item	Details	Status
Registration process		
Generation Process		
Issuance Process		
Suspension Process		
Replacement Process		
Revocation Process		
Archival Process		

(Please provide data in spatial or viable format)

1.2 Audit Trails

No		Trail level			
	Item	Target	Actual	Comment	status
1	Key Generation				
2	Key Distribution				
3	Key Storage				
4	Key Usage				
5	Key Backups				
6	Key Change				
7	Key Termination				
8	Key Compromise				
9	Key Archival				

1.3 System Controls

No	Item		
1.	Physical Security		
2.	General security controls		
3.	Change and Configuration management		
4.	Network Security		
5.	Application Integration Controls		
6.	Redundancy and recovery measures		
	Total		

a) ENVIRONMENTAL SUSTAINABILITY COMPLIANCE

Reporting on Environmental Sustainability Initiatives	
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7.1. Provide information on initiatives you are undertaking to establish channels of collecting both consumer and your own electronic waste (e-waste) at the end of life-cycle (please detail your take back mechanisms);

^{7.2.} Provide information on initiatives that you are undertaking in the operations to reduce the carbon footprint/negative environmental impact;

CA/F/CSE/CRF/0001				
7.3. Provide information on the current status of adherence to tand Coordination Act, EMCA on Waste Management.	the Environmental Management			
b) COMMENTS/ SUGGESTIONS				
Please share any challenges faced and/or make suggestions to improve the regula	tory environment.			
	(Company stamp here)			
Signed				
Name				
Title				
Date				
NB: a) Where Nil returns are provided an explanation <u>MUST</u> be provided under the b) The returns will only be accepted if the form is the most up to date as posted download the forms for every submission since reviews are made often to ensure	d on the CA website. Always			
THANK YOU FOR COMPLETING THIS FORM				

FOR OFFICIAL USE ONLY – DO NOT FILL BELOW THIS LINE

These returns have been :)

	Checked By:	Verified by:	Approved ☐ Rejected ☐ (Tick as appropriate)
Name			
Title			
Signature			
Date			

N/B A COMPLIANCE CERTIFICATE WILL NOT BE ISSUED IF THE COMPLIANCE RETURNS ARE SUBMITTED LATE OR REJECTED BY THE AUTHORITY